N17000009604

(Requestor's Name)		
(Address)		
(Address)		
<u> </u>		
(City/State/Zip/Phone #)		
(PICK-UP) WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

Can't Topp This Homeowners Association, Inc.			
UBJECT:(Name of Corporation)			
DOCUMENT NUMBER: N17000009604			
The enclosed Officer/Director Resignation for a Corporat	tion and fee are submitted for filing		
Please return all correspondence concerning this matter to	o the following:		
Frances C. Lowe			
(Name of Person)			
Frances Casey Lowe, P.A.			
(Name of Firm/Company)			
68-A Feli Way			
(Address)			
Crawfordville, Ft. 32327			
(City/State and Zip Code)	_		
For further information concerning this matter, please ca	II:		
Michelle Maloni 850 at (926-8245 Code & Daytime Telephone Number)		
(Name of Person) (Area C	Code & Daytime Telephone Number)		

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Kurt Topp I,	Director hereby resign as	
		(Title)
Can't Topp This Homeowners		
	(Name of Corporation)	
N1700009604 (Document Number, if kn	, a corporation organized under the	e laws of the State of
Florida		
	(Signature of resigning of Ocer/director)	ZOZOFEBII SECECII
	FILING FEE IS \$35.00	AH 9:25
Make checks	s payable to Florida Department of State a	nd mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314